## Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 1 of 69

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Holly	
p e li	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Serrano	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2884	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 2 of 69

Debtor 1 Holly Serrano Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live	259 Glen Crossing Dr.	If Debtor 2 lives at a different address:			
		Pataskala, OH 43062  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Licking				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
ò.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 3 of 69

Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

**Holly Serrano** 

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 4 of 69

Case number (if known)

12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code
	it to this petition.		Checi		x to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				`	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-fl	idicate that you are a ow statement, and for	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am r	not filing under Chap	ter 11.
		□ No.	I am f Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and r Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or		Whore is	s the property?	
	livestock that must be fed, or a building that needs urgent repairs?		where is	s the property:	

Debtor 1 Holly Serrano

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 5 of 69

Debtor 1 Holly Serrano Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 6 of 69

Den	Holly Serrano				Case number (	II KIIOWII)			
Par	6: Answer These Quest	ions for Repo	orting Purposes						
16.	What kind of debts do you have?	ind	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  ☐ No. Go to line 16b.						
			Yes. Go to line 17.  Are your debts primarily business debts? Business debts are debts that you incurred to obtain						
		mo	oney for a business or investme						
			No. Go to line 16c.						
		_	Yes. Go to line 17.	hat are not concur	nor dobto or business	dobto			
		16c. St	ate the type of debts you owe t	nat are not consur	ner debts or business (	debts			
17.	Are you filing under Chapter 7?	□ No. Ia	m not filing under Chapter 7. G	So to line 18.					
	Do you estimate that after any exempt property is excluded and		m filing under Chapter 7. Do yo e paid that funds will be availab			ty is excluded and administrative expenses			
	administrative expenses are paid that funds will		No						
	be available for distribution to unsecured creditors?		Yes						
18.	How many Creditors do you estimate that you owe?	<b>1</b> -49		□ 1,000-5,000		□ 25,001-50,000			
		□ 50-99		<u></u> 5001-10,000		<u></u> 50,001-100,000			
		□ 100-199 □ 200-999		□ 10,001-25,00	00	☐ More than100,000			
19.	How much do you	<b>■</b> \$0 - \$50,0	200	□ \$1,000,001 -	- \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,001 -		□ \$10,000,001	- \$50 million	☐ \$1,000,000,001 - \$10 billion			
	be worth?	□ \$100,001	- \$500,000	\$50,000,001		□ \$10,000,000,001 - \$50 billion			
		\$500,001	- \$1 million	\$100,000,00	11 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$50,0		□ \$1,000,001 -		□ \$500,000,001 - \$1 billion			
	to be?	□ \$50,001 ■ \$100,001		□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		□ \$500,001		_ ' ' '	1 - \$500 million	☐ More than \$50 billion			
Par	7: Sign Below								
For	you	I have exami	ined this petition, and I declare	under penalty of p	perjury that the informa	tion provided is true and correct.			
						nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		I understand bankruptcy of and 3571. /s/ Holly So	ase can result in fines up to \$2	cealing property, c 250,000, or impriso	or obtaining money or ponment for up to 20 year	oroperty by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Holly Serra Signature of	ano		Signature of Debtor 2				
		Executed on	March 5, 2020		Executed on				
			MM / DD / YYYY		MM / I	DD / YYYY			

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 7 of 69

Debtor 1 Holly Serrano Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jennifer G. CaJacob	Date	March 5, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Jennifer G. CaJacob 0072689 Printed name		
CaJacob Law Group Firm name		
470 Olde Worthington Rd., Suite 200 Westerville, OH 43082		
Number, Street, City, State & ZIP Code		
Contact phone 614-410-6640	Email address	jennifer@cajacoblawgroup.com
0072689 OH		
Bar number & State		

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 8 of 69

		Docume	ent Page 8 of 6	9	
Fill in this inform	nation to identify your	case:			
Debtor 1	Holly Serrano First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					☐ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

### Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 1.907.64 1c. Copy line 63, Total of all property on Schedule A/B..... 1,907.64 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 117,338.32 Your total liabilities \$ 117.338.32 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 3,246.62 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 3,199.37 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

## Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 9 of 69

Debtor 1 Holly Serrano Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	57,452.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	57,452.00

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 10 of 69

		Documen	t Page 10 of 69	
Fill in this inforr	nation to identify your	case and this filing:		
Debtor 1	Holly Serrano			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT OF	OHIO	
Case number				☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
	e A/B: Prop	ertv		12/15
	•		ee. If an asset fits in more than one category, list	
think it fits best. B	e as complete and accur	ate as possible. If two married	people are filing together, both are equally respo On the top of any additional pages, write your na	nsible for supplying correct
Answer every ques		a coparate choos to time forms	on the top of any additional pages, with your ne	and did oddo nambor (ir known).
Part 1: Describe	Each Residence, Buildin	g, Land, or Other Real Estate Y	ou Own or Have an Interest In	
1. Do you own or h	nave any legal or equitab	e interest in anv residence, bu	ilding, land, or similar property?	
_		• • • • • • • • • • • • • • • • • • •		
No. Go to Par				
Yes. Where is	s the property?			
Part 2: Describe	Your Vehicles			
			cles, whether they are registered or not? Ind G: Executory Contracts and Unexpired Lease	
3. Cars, vans, tro	ucks, tractors, sport u	tility vehicles, motorcycles		
■ No				
☐ Yes				
00				
			vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
5 A d d 4b a d all a		for all of	sian from Bort O including one outsian for	
			ies from Part 2, including any entries for	\$0.00
	Your Personal and Hous			Owners to reduce of the
		able interest in any of the f	ollowing items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture	e, linens, china, kitchenware		
Yes. Descri	ribe			
	Furniture	and household goods		\$1,500.00
	Turrinture	ana nousenoia goods		Ψ1,550.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

Official Form 106A/B Schedule A/B: Property page 1

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Page 11 of 69 Document Debtor 1 Case number (if known) **Holly Serrano** ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$200.00 Clothing Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$200.00 Costume jewelry & Apple watch 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.900.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts: certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name:

Official Form 106A/B Schedule A/B: Property page 2

■ Yes.....

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Page 12 of 69 Document Case number (if known) Debtor 1 Holly Serrano 17.1. Checking Fifth Third Bank \$7.64 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  $\hfill \square$  Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. .... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Debtor 1	Holly Serrano	Document	Page 13 of 69 Case number (if	known)
	refunds owed to you			
	-			
■ Ye	s. Give specific information abou	t them, including whether you alre	eady filed the returns and the tax years.	
		Anticipated 2019 income	e tax refund	Unknowi
		Anticipated 2019 Earned and Additional Child		Unknowi
		and Additional Cilii	a rax credit	- Olikilowi
20 <b>Fam</b>	ily support			
		nony, spousal support, child supp	ort, maintenance, divorce settlement, p	roperty settlement
■ No	•			
∐ Ye	s. Give specific information			
30 Othe	er amounts someone owes you			
	mples: Unpaid wages, disability i	nsurance payments, disability ben	efits, sick pay, vacation pay, workers'	compensation, Social Security
■ No	benefits; unpaid loans yo	u made to someone else		
	s. Give specific information			
	ests in insurance policies mples: Health, disability, or life in	surance; health savings account (	HSA); credit, homeowner's, or renter's	insurance
■ No	)			
☐ Ye	s. Name the insurance company	of each policy and list its value.  ny name:	Beneficiary:	Surrender or refund
	Compar	ry riamo.	Beneficiary.	value:
		you from someone who has die		
•	ou are the beneficiary of a living to seone has died.	rust, expect proceeds from a life in	surance policy, or are currently entitled	I to receive property because
■ No				
☐ Ye	s. Give specific information			
00 <b>Clai</b>		on an mot view bove filed a leview	:4	
		sputes, insurance claims, or right	it or made a demand for payment s to sue	
■ No				
☐ Ye	s. Describe each claim			
_	-	claims of every nature, including	g counterclaims of the debtor and ri	ghts to set off claims
■ No				
⊔ Ye	s. Describe each claim			
_ `	financial assets you did not all	ready list		
■ No	s. Give specific information			
	s. Give specific information			
	•		ny entries for pages you have attach	4761
tor	Part 4. Write that number here			Ψ1.04
Part 5:	Describe Any Business-Related Pro	operty You Own or Have an Interest	In. List any real estate in Part 1.	
	·	le interest in any business-related p	-	
	Go to Part 6.	io interest in any business-relateu p	roporty:	
	. Go to line 38.			

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main

Official Form 106A/B Schedule A/B: Property page 4

Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Case 2:20-bk-51239 Doc 1 Page 14 of 69 Document Debtor 1 Case number (if known) **Holly Serrano** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information.......

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items, line 15		\$1,900.00		
58.	Part 4: Total financial assets, line 36		\$7.64		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$1,907.64	Copy personal property total	\$1,907.64

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$0.00

\$1,907.64

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 15 of 69

Fill in this infor	mation to identify your	case:	.,	
Debtor 1	Holly Serrano			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Furniture and household goods Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ente from Genedate AVB. G.1			100% of fair market value, up to any applicable statutory limit	2020.00((+)(+)(a)
Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ente nom schedule A/D. TT.T			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)
Costume jewelry & Apple watch Line from Schedule A/B: 12.1	\$200.00	100% of fair market value	\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Enternolli Goriodale 7VB. 1211			100% of fair market value, up to any applicable statutory limit	2020100(11)(11)(21)
Checking: Fifth Third Bank Line from Schedule A/B: 17.1	\$7.64	•	\$7.64	Ohio Rev. Code Ann. § 2329.66(A)(3)
Ente from Genedate AVB. 17.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)
Anticipated 2019 income tax refund	Unknown		\$492.36	Ohio Rev. Code Ann. § 2329.66(A)(3)
LINE HOITI SCHEUUIE PAD. 20.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)

# Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 16 of 69

Debto	r1 Holly Serrano			Case number (if known)	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Inticipated 2019 income tax refund ine from Schedule A/B: 28.1	Unknown		\$1,325.00	Ohio Rev. Code Ann. §
L	ine from Scriedule A/B: <b>20.1</b>		100% of fair market value, up to any applicable statutory limit		2329.66(A)(18)
	nticipated 2019 Earned Income	Unknown		100%	Ohio Rev. Code Ann. § 2329.66(A)(9)(f)
C	redit ine from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	2323.00(\(\alpha\)(3)(1)
	re you claiming a homestead exemption Subject to adjustment on 4/01/22 and every  No  Yes. Did you acquire the property cover  No  Yes	3 years after that for ca	ases fi	,	,

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 17 of 69

Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Holly Serrano						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO				
Case number							
(if known)				☐ Check if this is an amended filing			

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 18 of 69

		Document	t Page 18 of 69	
Fill in this info	ormation to identify your	case:		
Debtor 1	Holly Serrano			
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT O	F OHIO	
Coco number				
Case number (if known)				Check if this is an
				amended filing
				-
	<u>rm 106E/F</u>			
Schedule	E/F: Creditors W	/ho Have Unsecur	ed Claims	12/15
Schedule G: Exe Schedule D: Cre eft. Attach the C	ecutory Contracts and Unexpeditors Who Have Claims Sec	pired Leases (Official Form 106 ured by Property. If more space	Also list executory contracts on Schedule A/B: Property (Officib). Do not include any creditors with partially secured claim is inseeded, copy the Part you need, fill it out, number the eto report in a Part, do not file that Part. On the top of any add	s that are listed in ntries in the boxes on the
Part 1: List	t All of Your PRIORITY Ur	secured Claims		
1. Do any cree	ditors have priority unsecure	d claims against you?		
No. Go t	o Part 2.			
☐ Yes.				
Part 2: List	t All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any cree	ditors have nonpriority unse	cured claims against you?		
☐ No. You	have nothing to report in this p	art. Submit this form to the court	with your other schedules.	
Yes.				
unsecured of	claim, list the creditor separatel	y for each claim. For each claim	of the creditor who holds each claim. If a creditor has more the listed, identify what type of claim it is. Do not list claims already in you have more than three nonpriority unsecured claims fill out the	ncluded in Part 1. If more
				Total claim
4.1 Acce	ptance Now	Last 4 digits o	f account number	\$2,414.00
Nonpri	ority Creditor's Name			<u> </u>
	Headquarters Dr.	When was the	debt incurred?	_
	o, TX 75024 er Street City State Zip Code	As of the date	you file, the claim is: Check all that apply	
	curred the debt? Check one.	As of the date	you me, the claim is. Oneok all that apply	
_	otor 1 only	☐ Contingent		
☐ Deb	otor 2 only	☐ Unliquidated	1	
	otor 1 and Debtor 2 only	☐ Disputed	•	
	east one of the debtors and an		RIORITY unsecured claim:	
	eck if this claim is for a com			
debt	con il tilis cialiff is for a COIII	<u> </u>	arising out of a separation agreement or divorce that you did not	
Is the	claim subject to offset?	report as priorit		
■ No		Debts to per	nsion or profit-sharing plans, and other similar debts	
☐ Yes	3	Other, Spec	sify Account	
		<b>op</b> 00	* <del></del>	—

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 19 of 69

Debio	Holly Serrano	Case number (if known)	
4.2	ACE Cash Express, Inc.	Last 4 digits of account number	\$1,003.80
	Nonpriority Creditor's Name 1231 Greenway Drive Suite 600	When was the debt incurred?	
	Irving, TX 75038  Number Street City State Zip Code	A of the data was file the plains in Oberel all that such	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Loan	
4.3	ACIMA Credit FKA Simple	Last 4 digits of account number	\$1,538.00
	Nonpriority Creditor's Name 9815 S. Monroe St.	When was the debt incurred?	
	Floor 4		
	Sandy, UT 84070  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	⊔ Yes	Other. Specify Account	
4.4	Allstate Insurance Company	Last 4 digits of account number	\$1,241.96
	Nonpriority Creditor's Name P.O. Box 12055	When was the debt incurred?	
	1819 Electric Rd. S.W.		
	Roanoke, VA 24018		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	⊔ YeS	Other. Specify Account	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 20 of 69

Debit	Holly Serrano	Case number (if known)	
4.5	Berkeley Park LLC	Last 4 digits of account number	\$6,342.14
	Nonpriority Creditor's Name 5185 Sulgrave Drive New Albany, OH 43054	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Broken lease	
4.6	Capital One Auto Finance	Last 4 digits of account number	\$6,813.00
	Nonpriority Creditor's Name CB Disputes Team PO Box 259407	When was the debt incurred?	. ,
	Plano, TX 75025  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, a contain the man of the man appropriate the	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Reposession deficiency	
4.7	Capital One Bank	Last 4 digits of account number	\$351.00
	Nonpriority Creditor's Name 15000 Capital One Drive	When was the debt incurred?	
	Richmond, VA 23238  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card	
		· ·	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 21 of 69

Debio	Holly Serrano	Case number (# known)	
4.8	CashNet USA	Last 4 digits of account number	\$582.92
	Nonpriority Creditor's Name 175 W. Jackson Blvd., Suite 1000 Chicago, IL 60604	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.9	Check City	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 2729 B W. Broad St. Richmond, VA 23220	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.1	Chesterfield EFCU	Last 4 digits of account number	\$453.00
0	Nonpriority Creditor's Name		<del></del>
	PO Box 820	When was the debt incurred?	
	Chesterfield, VA 23832  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date year me, the damine. Onesk an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Loan	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 22 of 69

Case number (if known)

. Hony Seriano	Odde Humber (ii kilowil)	
Chesterfield EFCU	Last 4 digits of account number	\$444.00
Nonpriority Creditor's Name PO Box 820	When was the debt incurred?	
Chesterfield, VA 23832  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Loan	
Chesterfield EFCU	Last 4 digits of account number	\$649.00
Nonpriority Creditor's Name		***************************************
PO Box 820	When was the debt incurred?	
Chesterfield, VA 23832  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Overdraft	
Columbia Gas of Ohio	Last 4 digits of account number	\$192.65
Nonpriority Creditor's Name Revenue Recovery	When was the debt incurred?	
PO Box 117 Columbus, OH 43216		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify <b>Utility</b>	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 23 of 69

Case number (if known)

Debtor	1 Holly Serrano	Case number (if known)	
4.1	Commonwealth Anesthesia Associates	Last 4 digits of account number	\$168.00
	Nonpriority Creditor's Name PO 35808	When was the debt incurred?	
	Richmond, VA 23235		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1	Credit One Bank		\$604.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψου-1.00
	PO Box 98872 Las Vegas, NV 89193-8872	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	
4.1			
6	Department of Education/Navient	Last 4 digits of account number	\$57,452.00
	Nonpriority Creditor's Name 123 Justison Street	When was the debt incurred?	
	3rd floor Newark, DE 19713		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	■ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	☐ Other. Specify	
		Student loan	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 24 of 69

4.1 7	Dominion Energy	Last 4 digits of account number	\$261.76
	Nonpriority Creditor's Name	When we the debt in some dO	
	1 James Ctr Richmond, VA 23219	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility	
4.1	Erie Insurance Group Home Office	Lock 4 digite of economy mumber	\$333.50
8	Nonpriority Creditor's Name	Last 4 digits of account number	ψ333.30
	100 Erie Insurance Place	When was the debt incurred?	
	Erie, PA 16530		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Account	
4.1			
9	First Premier Bank	Last 4 digits of account number	\$450.00
	Nonpriority Creditor's Name 3820 N. Louise Ave.	When was the debt incurred?	
	Sioux Falls, SD 57107		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	No		
	□Yes	Other. Specify Credit card	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 25 of 69

Holly Serrano Case number (if known)

4.2 0	First Virginia	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 159 E. Belt St.	When was the debt incurred?	
	Richmond, VA 23224	when was the debt incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.2	Geico Casualty Company		\$406.72
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ400.72
	One Geico Center	When was the debt incurred?	
	Macon, GA 31296-0001		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Account	
		— Officer, Specify	
4.2 2	Huntington National Bank	Last 4 digits of account number	\$373.73
	Nonpriority Creditor's Name	When we the debt in some dO	
	41 S. High St. Columbus, OH 43215	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Account	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 26 of 69

Debtor	1 Holly Serrano	Case number (if known)	
Debtor 4.2 3	Kemper Direct Insurance Company Nonpriority Creditor's Name P.O. Box 3057 Scranton, PA 18505 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Case number (if known)  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	\$29.60
	Yes	Other. Specify Account	
4.2	Liberty Mutual Insurance Company  Nonpriority Creditor's Name 1333 Main Street, Suite 600 Columbia, SC 29201  Number Street City State Zip Code	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	\$1,488.04
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Account	
4.2	Lifestyle Communities LTD  Nonpriority Creditor's Name 5946 New Albany Rd. West New Albany, OH 43054  Number Street City State Zip Code	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	\$4,681.55
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other, Specify Eviction	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 27 of 69

Case number (if known)

Debloi	Holly Serrano	Case number (if known)	
4.2	Main Street Dental of New Albany	Last 4 digits of account number	\$49.00
	Nonpriority Creditor's Name 153 W. Main Street Suite 101	When was the debt incurred?	
	New Albany, OH 43054  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	Mount Carmel Health System	Last 4 digits of account number	\$4,413.90
	Nonpriority Creditor's Name 6150 East Broad Street Columbus, OH 43213	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.2	Nationwide Energy Partners	Last 4 digits of account number	\$815.36
	Nonpriority Creditor's Name 80 West St., Suite 150 Columbus, OH 43215	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utility	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 28 of 69

Debto	Pr 1 Holly Serrano	Case number (if known)	
4.2	Nationwide Insurance	Last 4 digits of account number	\$250.00
9	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ230.00
	P.O. Box 182150	When was the debt incurred?	
	Columbus, OH 43218-2150		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	<u> </u>	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Account	
4.3 0	OhioHealth Corporation	Last 4 digits of account number	\$263.50
	Nonpriority Creditor's Name	When we the debt in sumed 2	
	5350 Frantz Rd.	When was the debt incurred?	
	Dublin, OH 43016  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date you me, the claim to. Oneok all that apply	
	■ Debtor 1 only	Полож	
		Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.3	PNC Bank		\$37.89
1	Nonpriority Creditor's Name	Last 4 digits of account number	<b>Ф</b> 37.09
	PO Box 3180	When was the debt incurred?	
	Pittsburgh, PA 15230		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify Account	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 29 of 69

Debioi	Holly Serrano	Case number (if known)	
4.3	Possible Financial	Last 4 digits of account number	\$47.00
	Nonpriority Creditor's Name		•
	2231 First Ave. Suite B	When was the debt incurred?	
	Seattle, WA 98121	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.3	Dragrandiva		¢4.065.06
3	Progressive	Last 4 digits of account number	\$1,065.96
	Nonpriority Creditor's Name 256 W. Data Dr.	When was the debt incurred?	
	Draper, UT 84020		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	<u> </u>	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Account	
4.3	Progressive Insurance	Last 4 digits of account number	\$876.06
4	Nonpriority Creditor's Name		Ψοι σισσ
	PO Box 31260	When was the debt incurred?	
	Tampa, FL 33631		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Account	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 30 of 69

Case number (if known)

Debtor	Holly Serrano	Case number (if known)	
4.3	QVC Inc	Last 4 digits of account number	\$623.28
U	Nonpriority Creditor's Name		<u> </u>
	PO Box 2254	When was the debt incurred?	
	West Chester, PA 19380	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Account	
4.3 6	Rainbow Pediatrics	Last 4 digits of account number	\$50.00
	Nonpriority Creditor's Name		
	153 W Main St., Suite 200	When was the debt incurred?	
	New Albany, OH 43054	As of the date year file, the plains in Observation What are by	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	_	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.3	RBC	Last 4 digits of account number	\$65.00
	Nonpriority Creditor's Name	<del></del>	
	PO Box 1548	When was the debt incurred?	
	Mansfield, OH 44901-1548		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Collection	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 31 of 69

Case number (if known)

Debioi	Holly Serrano	Case number (# known)	
4.3	Reginonal Acceptance	Last 4 digits of account number	\$12,020.63
	Nonpriority Creditor's Name	<del></del>	
	PO Box 61476	When was the debt incurred?	
	Virginia Beach, VA 23466  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	<u> </u>		
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Reposession deficiency	
4.3	Savanth Avanua		\$244.00
9	Seventh Avenue  Nonpriority Creditor's Name	Last 4 digits of account number	\$211.00
	1112 7th Avenue	When was the debt incurred?	
	Monroe, WI 53566-1364		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	■ Other. Specify Credit card	
4.4	Speedy Cash	Last 4 digits of account number	\$482.00
	Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
	PO Box 780408	When was the debt incurred?	
	Wichita, KS 67278-0408		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Loan	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 32 of 69

Case number (if known)	
Last 4 digits of account number	\$652.77
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Account	
Last 4 digits of account number	\$359.00
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
, , , , , , , , , , , , , , , , , , , ,	
☐ Contingent	
· · ·	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Credit card	
Local Adigita of account number	\$1,514.60
	Ψ1,014.00
When was the debt incurred?	
As of the date year file, the plaint is Check all that soonly	
As of the date you file, the claim is. Check all that apply	
□ Contingent	
_	
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
Type of NONPRIORITY unsecured claim:	
Type of NONPRIORITY unsecured claim:  ☐ Student loans	
<u></u>	
☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts  Cother. Specify Account  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Cother. Specify Credit card  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Credit card

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 33 of 69

Case number (if known)

Deb	Holly Serrano	Case number (if known)	
4.4 4	The Bank of Missouri - Total Visa	Last 4 digits of account number	\$466.00
	Nonpriority Creditor's Name PO Box 85710	When was the debt incurred?	
	Sioux Falls, SD 57118		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Credit card	
4.4	] _, _ , ,,,,		<b></b>
5	The Bank of Missouri - Total Visa	Last 4 digits of account number	\$459.00
	Nonpriority Creditor's Name PO Box 85710	When was the debt incurred?	
	Sioux Falls, SD 57118		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card	
4.4 6	The Little Clinic	Last 4 digits of account number	\$104.00
<u> </u>	Nonpriority Creditor's Name 2620 Elmhill Pike	When was the debt incurred?	
	Nashville, TN 37214		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Medical	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 34 of 69

Debt	or 1 Holly Serrano	Case number (if known)	
4.4	W		40.700.00
7	Verizon Wireless Nonpriority Creditor's Name	Last 4 digits of account number	\$2,738.00
	PO Box 650051 Dallas, TX 75265	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce tha report as priority claims	t you did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utility	
4.4 8	Wells Fargo	Last 4 digits of account number	\$500.00
0	Nonpriority Creditor's Name		
	PO Box 6995 Portland, OR 97228	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that report as priority claims	t you did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Overdraft	
Part	3: List Others to Be Notified About a D	ebt That You Already Listed	
is tı hav	ying to collect from you for a debt you owe to	about your bankruptcy, for a debt that you already listed in Parts 1 or someone else, list the original creditor in Parts 1 or 2, then list the collaborate you listed in Parts 1 or 2, list the additional creditors here. If you do or submit this page.	ection agency here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	Astra Recovery Services, Inc.	Line 4.40 of (Check one):	
7330	e 118 ) W. 33rd Street N. hita, KS 67205	■ Part 2: Creditors with Nonprior	ity Unsecured Claims
****		Last 4 digits of account number	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	ed Interstate Box 19326	Line 4.15 of (Check one):	
	neapolis, MN 55419	Part 2: Creditors with Nonprior	ity Unsecured Claims
	• ,	Last 4 digits of account number	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	an Financial Box 722929	Line 4.6 of (Check one):	
	ston, TX 77272	Part 2: Creditors with Nonprior	ity Unsecured Claims
	<b>,</b> <del>-</del> - <del>-</del> -	Last 4 digits of account number	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	ociated Credit Services, Inc. Flanders Road, Suite 140	Line 4.41 of (Check one):	
	aao.o noaa, oano 170	Part 2: Creditors with Nonprior	ity Unsecured Claims

Official Form 106 E/F

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 35 of 69

Debtor 1 Holly Serrano	Case number (if known)	
PO Box 5171 Westborough, MA 01581-5171		
	Last 4 digits of account number	
Name and Address CBCS PO Box 163729	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.30 of (Check one):  Part 1: Creditors with Priority Unsecured Claims	
Columbus, OH 43216-3729	■ Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
CBE Group 1309 Technology Pkwy	Line 4.17 of (Check one):	
Cedar Falls, IA 50613	■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address CBHV	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.39 of (Check one):	
PO Box 831 Newburgh, NY 12550	Part 2: Creditors with Nonpriority Unsecured Claims	
14c W 5 d 1 g 1 1, 14 1 1 2 3 3 0	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?  Line <b>4.17</b> of ( <i>Check one</i> ):	
501 Green St. 3rd Floor, suit 301	Part 2: Creditors with Nonpriority Unsecured Claims	
Augusta, GA 30901	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Central Credit Services, LLC	Line 4.38 of (Check one):	
20 Corporate Hills Dr. Saint Charles, MO 63301-3749	Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Convergent 800 SW 396h St. Suite 100	Line 4.47 of (Check one):	
Renton, WA 98057	■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address  Convergent	On which entry in Part 1 or Part 2 did you list the original creditor?  Line <b>4.41</b> of ( <i>Check one</i> ):	
PO Box 9004	Line 4.41 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Renton, WA 98057	Last 4 digits of account number	
	· · · · · · · · · · · · · · · · · · ·	
Name and Address  Credit Collection Services	On which entry in Part 1 or Part 2 did you list the original creditor?  Line <b>4.29</b> of ( <i>Check one</i> ):	
PO Box 607	Part 2: Creditors with Nonpriority Unsecured Claims	
Norwood, MA 02062	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Credit Collection Services	Line 4.24 of (Check one):	
725 Canton Street Norwood, MA 02062	Part 2: Creditors with Nonpriority Unsecured Claims	
11011110004, 11171 02002	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Credit Collection Services 725 Canton Street	Line 4.21 of (Check one):	
Norwood, MA 02062	■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Credit Collection Services 725 Canton Street	Line 4.31 of (Check one):	
Norwood, MA 02062	■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 36 of 69

Debtor 1 Holly Serrano		Case number (if known)
Name and Address Diversified Consultants PO Box 551268 Jacksonville, FL 32255		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address EOS CCA PO Box 169 Norwell, MA 02061		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address ERC PO Box 23870 Jacksonville, FL 32241-3870		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Fabco PO Box 20850 Columbus, OH 43220		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address First National Collection Bureau, Inc. 610 Waltham Way Sparks, NV 89434		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Hunter Warfield 4620 Woodland Corporate Blvd. Tampa, FL 33614		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Jefferson Capital System, LLC PO Box 7999 Saint Cloud, MN 56302-7999		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Joseph Mann & Creed PO Box 1270 Twinsburg, OH 44087	_	u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address JP Recovery Services PO Box 183221 Columbus, OH 43218-3221		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address K A P S & Co., USA LLC 2210 Plaza Dr., Suite 150 Rocklin, CA 95765		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Larayteet Ayers & Whitlock 10160 Staples Mill Road Suite 105 Glen Allen, VA 23060		u list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address LVNV Funding LLC	On which entry in Part 1 or Part 2 did yo Line 4.15 of (Check one):	u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 37 of 69

Debtor 1 Holly Serrano		Case number (if known)
c/o Resurgent Capital Services PO Box 1269 Greenville, SC 29603		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address National Credit Adjusters PO Box 3023 327 W. 4th St. Hutchinson, KS 67504-3023	On which entry in Part 1 or Part 2 did Line 4.8 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address National Credit Systems PO Box 312125 Atlanta, GA 31131	On which entry in Part 1 or Part 2 did to Line 4.5 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Nationwide Credit, Inc. PO Box 10354 Des Moines, IA 50306-0354	On which entry in Part 1 or Part 2 did Line 4.35 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address NES - Nation Enterprise Systems 2479 Edison Blvd., Unit A Twinsburg, OH 44087-2340	On which entry in Part 1 or Part 2 did Line 4.31 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Northland Group Inc. PO Box 390846 Minneapolis, MN 55439	On which entry in Part 1 or Part 2 did Line 4.7 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Penn Credit Corporation PO Box 988 Harrisburg, PA 17108-0988	On which entry in Part 1 or Part 2 did Line 4.17 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Portfolio Recovery Associates 120 Corporate Blvd. Suite 100 Norfolk, VA 23502	On which entry in Part 1 or Part 2 did y Line 4.7 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Professional Recovery Consultants 2700 Meridian Pkwy Suite 200 Durham, NC 27713	On which entry in Part 1 or Part 2 did the Line 4.39 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address RMS PO Box 19646 Minneapolis, MN 55419	On which entry in Part 1 or Part 2 did the Line 4.18 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100	On which entry in Part 1 or Part 2 did : Line 4.22 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Tate & Kirlin Associates 2810 Southampton Road	On which entry in Part 1 or Part 2 did the Line 4.38 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

### Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 38 of 69

Debtor 1 Holly Serrano		Case number (if known)				
Philadelphia, PA 19154-1207						
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
Vantage Sourcing	Line 4.47 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 6786 Dothan, AL 36302		■ Part 2: Creditors with Nonpriority Unsecured Claims				
•	Last 4 digits of account number					

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 57,452.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,886.32
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 117,338.32

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 39 of 69

Fill in this infor	rmation to identify your	case:		
Debtor 1	Holly Serrano			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	•				
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	Jily		<u> </u>	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 40 of 69

		Docume	nı Page 40 C	09	
Fill in thi	is information to identify your	case:			
Debtor 1	Holly Correna				
Debior	Holly Serrano First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name	_	
United St	tates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
	, ,				
Case nur	mber				Charlet Williams
(II KIIOWII)					Check if this is an amended filing
					amended ming
Officia	al Form 106H				
		lahtara			
scne	dule H: Your Cod	leptors			12/15
2. Wi Arizo	es ithin the last 8 years, have yo ona, California, Idaho, Louisiana on Go to line 3. es. Did your spouse, former spout of your codeb one 2 again as a codebtor only	u lived in a community pr a, Nevada, New Mexico, Pu ouse, or legal equivalent live otors. Do not include your if that person is a guaran	operty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make	ry? (Community propert iington, and Wisconsin.) r if your spouse is filin sure you have listed tl	
	Column 2.	11 01111 100E/1 ), 01 0c11cu	ale o (omeiai i omi i	ooo). Ose ooneddie D,	ochedule 27, or ochedule o to ill
	Column 1: Your codebtor	7ID 0 - 1 -			editor to whom you owe the debt
	Name, Number, Street, City, State and 2	ZIP Gode		Check all schedule	es that apply:
3.1				☐ Schedule D, lin	e
0.1	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	
	N				
	Number Street City	State	ZIP Code		
				_	
3.2	Nama			Schedule D, lin	
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street				
	City	State	ZIP Code		

Fill	in this information to	identify your ca	ase:				1				
	btor 1	Holly Serran									
_	btor 2 buse, if filing)					_					
Uni	ited States Bankrupt	cy Court for the	SOUTHERN DISTRIC	CT OF OHIO							
	se number								ed filing ent showin	g postpetition ollowing date:	
<u>O</u>	fficial Form	<u> 1061</u>					N	MM / DD/ Y	YYYY		
S	chedule I: \	Your Inco	ome								12/15
spo atta	use. If you are sepa ch a separate shee	arated and you t to this form. ( Employment	are married and not filii r spouse is not filing wi On the top of any additi	ith you, do not inclu	ude infor	mati	on abou	t your spo umber (if	ouse. If mo known). A	ore space is	needed,
	If you have more the	han one ioh		■ Employed				☐ Empl		3 -1	
	attach a separate properties information about a	page with	Employment status	☐ Not employed				•	mployed		
	employers.		Occupation	Receptionist							
	Include part-time, s self-employed wor		Employer's name	The Pataskala	Vision (	ent	er				
	Occupation may in or homemaker, if it		Employer's address	180 E. Broad S Pataskala, OH		Α					
			How long employed to	here? 5 mon	ths			_			
Par	ft 2: Give Deta	ails About Mon	thly Income								
	mate monthly incouse unless you are s		ate you file this form. If	you have nothing to	report for	any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing s e space, attach a se		re than one employer, cothis form.	ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Del	btor 1		btor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$	3	,011.25	\$	N/A	
3.	Estimate and list	monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross I	ncome. Add lin	e 2 + line 3.		4.	\$	3,0	11.25	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Holly Serrano	-	С	ase number (if kn	own)				
					For Debtor 1			Debtor :	pouse	
	Cop	by line 4 here	4.		\$3,011	.25	\$		N/A	_
5.	List	t all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 414	.63	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		. — — — — — — — — — — — — — — — — — — —	.00	\$		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.		·	.00	\$		N/A N/A	_
	5g.	Union dues	5g.		·	.00	- \$ \$		N/A N/A	_
	5h.	Other deductions. Specify:	5h.		·		+ \$		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	9	\$ 414		\$		N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	\$ 2,596		\$		N/A	_
8.		t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross				.02	<b>*</b>			-
		receipts, ordinary and necessary business expenses, and the total								
	01	monthly net income.	8a.			.00	\$		N/A	_
	8b. 8c.	Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent	8b.	•	\$0	.00	\$		N/A	_
	ос.	regularly receive Include alimony, spousal support, child support, maintenance, divorce	90		\$ 650	00	\$		NI/A	
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.			.00	* *		N/A N/A	_
	8e.	Social Security	8e.			.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			.00	\$		N/A	_
	8g.	Pension or retirement income	8g.			.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$0	.00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	650	.00	\$		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3,246.62	+ \$		N/A	= \$	3,246.62
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· –	0,210102	Ľ				0,210102
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					Schedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	3,246.62
13.	Do j	you expect an increase or decrease within the year after you file this form	?					L	Combine month!	ned y income
		No. Yes Explain:								1

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:							
Deb		Holly Serran				Ch	eck if thi	is is:		
		Tiony Jerran					An an	nended filing		
	tor 2 ouse, if filing)							•	ving postpetition chapter the following date:	
	, 0,									
Unit	ed States Bankr	ruptcy Court for the	SOUTH	IERN DISTRICT OF OHIC	)		MM /	DD / YYYY		
1	e number									
(II KI	nown)									
Of	fficial Fo	rm 106J								
So	chedule	J: Your I	Exper	ises					12/	/1:
Be info	as complete a	and accurate as	possible. eded, atta	If two married people a ch another sheet to this						
Par		ibe Your House	hold							
1.	Is this a joir									
	■ No. Go to	line 2. s Debtor 2 live i	n a senar	ate household?						
	□ res. <b>Doe</b>		ii a sepai	ate nousenoiu:						
			st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		De ag	ependent's le	Does dependent live with you?	
	Do not state	the							□ No	
	dependents				Son		9		■ Yes	
					Daughter		10	,	□ No	
					Daugnter				■ Yes □ No	
					Son		22	2	■ Yes	
									□ No	
3.	Do your exr	enses include	_						☐ Yes	
0.	expenses of	f people other tl	han 👝	No Yes						
	yourself and	d your depende	nts? —	100						
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a sup						
• •		1 - 1 - 1 1								
the		n assistance an		government assistance sluded it on <i>Schedule I:</i>				Your expe	enses	
(0	110101111111111111111111111111111111111	, o.i.,								
4.		or home owners and any rent for the		ses for your residence. r lot.	Include first mortgage	e 4.	\$		1,250.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's	-			4b.			0.00	
		maintenance, re owner's associat		ıpkeep expenses dominium dues		4c. 4d.			125.00 0.00	
5.				our residence, such as ho	ome equity loans	5.			0.00	

## Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 44 of 69

Debtor 1	Holly Serrano	Case num	ber (if known)	
6. <b>Util</b>	ities:			
6. <b>U</b> til 6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.		0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		149.37
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	ou. 7.	· -	
	dcare and children's education costs	7. 8.		825.00
				0.00
	thing, laundry, and dry cleaning	9.	\$	150.00
	sonal care products and services	10.	\$	150.00
	lical and dental expenses	11.	\$	65.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	235.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and religious donations	14.	· -	0.00
	irance.		<u> </u>	0.00
-	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	. Health insurance	15b.	· -	0.00
	Vehicle insurance	15c.	· -	0.00
	Other insurance. Specify:	15d.	·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		T	0.00
Spe	cify:	16.	\$	0.00
	allment or lease payments:  Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	· · · · · · · · · · · · · · · · · · ·	0.00
	• •	17b. 17c.	·	
	Other. Specify: Student loans		*	250.00
	Other. Specify:	17d.	<b>&gt;</b>	0.00
	r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		our Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	· -	0.00
	Property, homeowner's, or renter's insurance	20b. 20c.	· -	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	
		20u. 20e.	·	0.00
	Homeowner's association or condominium dues		· ·	0.00
	er: Specify:	21.	+\$	0.00
	culate your monthly expenses			
	Add lines 4 through 21.		\$	3,199.37
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		\$	3,199.37
3. <b>Cal</b>	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,246.62
	Copy your monthly expenses from line 22c above.	23b.		3,199.37
200		200.		<u> </u>
23c	Subtract your monthly expenses from your monthly income.	220	\$	47.25
	The result is your monthly net income.	23c.	Ψ	41.23
For	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			or decrease because of a
<b>■</b> 1	No.			

— 1 <b>1</b> 0.	
☐ Yes.	Explain here:

## Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 45 of 69

Fill in this infor	mation to identify your	case:			
		00001			
Debtor 1	Holly Serrano First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	r of ohio		
Case number					
(if known)					Check if this is an amended filing
If two married p	eople are filing togethe	r, both are equally respo	onsible for supplying corress or amended schedules.	ect information.	12/15
	y or property by fraud i 8 U.S.C. §§ 152, 1341, 1		kruptcy case can result in	i fines up to \$250,000	, or imprisonment for up to 20
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules filed	l with this declaration	and
X /s/ Hol	lly Serrano		X		
	Serrano		Signature of D	Debtor 2	

Date

Signature of Debtor 1

Date March 5, 2020

		nation to identify you	r case:						
De	ebtor 1	Holly Serrano First Name	Mic	ddle Name	L	ast Name			
	ebtor 2 pouse if, filing)	First Name	Mic	ddle Name		ast Name			
` '	. , ,					ast reame			
Ur	nited States Ban	kruptcy Court for the:	50016	HERN DISTRICT O	r OHIO				
1 - 1	ase number known)							_	eck if this is an nended filing
St		of Financial							4/1
inf nu	ormation. If me mber (if known	nd accurate as poss ore space is needed, ). Answer every que	attach a s stion.	separate sheet to t	his forr	n. On the top of ar			
F		etails About Your Ma		s and where You	Livea E	етоге			
1.	What is your	current marital statu	ıs?						
	☐ Married								
	■ Not marr	ried							
2.	During the la	st 3 years, have you	lived anyv	where other than w	vhere y	ou live now?			
	□ No								
	Yes. List	all of the places you l	ived in the	last 3 years. Do no	t include	where you live no	W.		
	Debtor 1 Pri	or Address:		Dates Debtor 1 lived there		Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there
		on Hush Dr. ly, OH 43054		From-To: 1/2017 - 2/2018	3	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
	7291 Tunb New Alban	ridge Dr. y, OH 43054		From-To: 2/2018 - 11/201	19	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
	No Yes. Mal	st 8 years, did you eves include Arizona, Ca ke sure you fill out <i>Sci</i>	lifornia, Ida hedule H: Y	aho, Louisiana, Nev	ada, Ne	w Mexico, Puerto F			
1 6	Expidii								
4.	Fill in the total	e any income from er I amount of income yo g a joint case and you	u received	from all jobs and al	ll busine	sses, including par	t-time activities.	ous calend	lar years?
	□ No								
	Yes. Fill	in the details.							
			Debtor 1				Debtor 2		
				of income that apply.		e deductions and sions)	Sources of income Check all that app		Gross income (before deductions and exclusions)

Case 2:20-bk-51239	Doc 1 Filed 03 Documen	/05/20 Entered 03 it Page 47 of 69	3/05/20 16:08:21 D	esc Main
Debtor 1 Holly Serrano	Documen		number (if known)	
	Debtor 1		Debtor 2	
	Sources of income	Gross income	Sources of income	Gross income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2019)	■ Wages, commissions, bonuses, tips	\$18,688.98	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$7,014.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
<ul> <li>Did you receive any other income Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas</li> <li>List each source and the gross inco</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>	er that income is taxable. Expensions; rental income; intelle and you have income that	amples of other income are all rest; dividends; money collect you received together, list it or	ed from lawsuits; royalties; an anly once under Debtor 1.	ecurity, unemployment, d gambling and lottery
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Child Support	\$1,300.00		
For last calendar year: (January 1 to December 31, 2019)	Child Support	\$7,800.00		
For the calendar year before that: (January 1 to December 31, 2018)	Child Support	\$7,800.00		

### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

□ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

☐ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Page 48 of 69 Document Debtor 1 Holly Serrano Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Amount you Dates of payment Total amount Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Nature of the case Status of the case Case title Court or agency Case number Berkeley Park LLC v. Holly Serrano **Eviction** Franklin County Municipal □ Pending 2019 CVG 036595 Court □ On appeal 375 South High Street Concluded 3rd Floor Columbus, OH 43215-4520 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened

Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main

Case 2:20-bk-51239

Doc 1

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21

Document Page 49 of 69 Debtor 1 Case number (if known) Holly Serrano **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** Chesterfield EFCU Wage garnishment 5/2019 -\$920.21 PO Box 820 9/2019 Chesterfield, VA 23832 □ Property was repossessed. ☐ Property was foreclosed. Property was garnished. □ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Amount Date action was 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Value Dates you more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses

Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

☐ Yes. Fill in the details.

Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 50 of 69

Deb	otor 1	Holly Serrano	C	ase number (	if known)		
Par	t 7:	List Certain Payments or Transfers					
16.	consu	n 1 year before you filed for bankruptcy, d ulted about seeking bankruptcy or prepari le any attorneys, bankruptcy petition prepare	ng a bankruptcy petition?			rty to anyone you	
	□ N	No					
		es. Fill in the details.					
	Addr Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not You	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment	
	470 Wes	acob Law Group Olde Worthington Rd., Suite 200 terville, OH 43082 ifer@cajacoblawgroup.com	Attorney Fees		2/20/2020	\$350.00	
	1916 Chic	eySharp 5 N. Fairfield Ave., Ste. 200 cago, IL 60647 v.moneysharp.org	Pre bankruptcy credit counseli	ng	2/11/2020	\$10.00	
17.	Do no	n 1 year before you filed for bankruptcy, dised to help you deal with your creditors out include any payment or transfer that you liston	or to make payments to your creditors	behalf pay o s?	r transfer any propei	rty to anyone who	
	Pers Addr	on Who Was Paid ress	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.						
	Pers Addr	on Who Received Transfer ess	Description and value of property transferred		any property or received or debts change	Date transfer was made	
	Pers	on's relationship to you			_		
19.	benef	n 10 years before you filed for bankruptcy iciary? (These are often called asset-protect No Yes. Fill in the details.		elf-settled tru	ist or similar device o	of which you are a	
	Nam	e of trust	Description and value of the prope	rty transferre	ed	Date Transfer was made	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 51 of 69

Debtor 1 Holly Serrano Case number (if known)

Par	t 8: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and	Storage Uni	ts	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, asso No  Yes. Fill in the details.	or other financial accou	nts; certificat	es of depos		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accinstrument		Date account was closed, sold, moved, or transferred	Last balanc before closing o transfe
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy,	any safe de	posit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within	1 year befo	re you filed for bankrupte	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any prop	erty you bor	rowed from, are storing	for, or hold in trust
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe	the property	Valu

### Part 10: Give Details About Environmental Information

**Daniel Serrano** 

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

2017 Buick Enclave with

35,000 miles

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

**Debtor's residence** 

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

\$18,750.00

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 52 of 69

Debtor 1 Holly Serrano Case number (if known)

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, d	did you own a business or have an	y of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a to	rade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executi	ive of a corporation						
	☐ An owner of at least 5% of the voting or	equity securities of a corporation						
	■ No. None of the above applies. Go to Part 1	12.						
	☐ Yes. Check all that apply above and fill in th	he details below for each business	<b>3.</b>					
	Address	scribe the nature of the business	Employer Identification number Do not include Social Security n	umber or ITIN.				
	(Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Dates business existed					
28.	Within 2 years before you filed for bankruptcy, dinstitutions, creditors, or other parties.	did you give a financial statement t	to anyone about your business? Inclu	de all financial				
	■ No							
	Yes. Fill in the details below.							
	Name Date Address (Number, Street, City, State and ZIP Code)	te Issued						

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 53 of 69

Debtor 1	Holly Serrano		Case number (if known)
Part 12:	Sign Below		
are true a with a ba		tatement, concealing property	and I declare under penalty of perjury that the answers , or obtaining money or property by fraud in connection 20 years, or both.
Holly Se	y Serrano errano e of Debtor 1	Signature of Debtor 2	
Date M	March 5, 2020	Date	
Did you a ■ No □ Yes	attach additional pages to Your Statement of Fi	inancial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
Did you p	pay or agree to pay someone who is not an atto	orney to help you fill out bankr	ruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 54 of 69

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Ohio

In re	Holly Serrano		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMI	PENSATION OF ATTO	RNEY FOR D	EBTOR(S)			
C	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 ompensation paid to me within one year before the e rendered on behalf of the debtor(s) in contemplati	filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or	to		
	For legal services, I have agreed to accept		\$	350.00			
	Prior to the filing of this statement I have receive	ved	\$	350.00			
	Balance Due		\$	0.00			
2. T	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3. T	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4. <b>I</b>	I have not agreed to share the above-disclosed co	ompensation with any other person	unless they are men	bers and associates of my law fi	irm.		
[	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				4		
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
b c.	<ul> <li>Analysis of the debtor's financial situation, and re-</li> <li>Preparation and filing of any petition, schedules,</li> <li>Representation of the debtor at the meeting of cree</li> <li>[Other provisions as needed]</li> </ul>	statement of affairs and plan which	may be required;				
6. B	By agreement with the debtor(s), the above-disclosed	d fee does not include the following	g service:				
		CERTIFICATION					
	certify that the foregoing is a complete statement of ankruptcy proceeding.	f any agreement or arrangement for	payment to me for	epresentation of the debtor(s) in	l		
Ma	arch 5, 2020	/s/ Jennifer G. Ca	Jacob				
Da	ite	Jennifer G. CaJac Signature of Attorne CaJacob Law Gro 470 Olde Worthin Westerville, OH 4 614-410-6640 Fa jennifer@cajacob Name of law firm	y oup ogton Rd., Suite 2 3082 x: 614-364-4800	00			

Fill in this info	ormation to identify your case:					lirected in this form and	in Form
Debtor 1	Holly Serrano		122	2A-1Supp:			
Debtor 2 (Spouse, if filing)			'	1. There	e is no pres	umption of abuse	
United States	s Bankruptcy Court for the: Southern District	of Ohio	_     '	appl	ies will be r	nade under <i>Chapter</i> 7	•
Case numbe	r		_	_		icial Form 122A-2).	,
(ii Kilowii)						does not apply now be y service but it could ap	
				☐ Check	if this is a	n amended filing	
	<u>Form 122A - 1</u>						
Chapte	r 7 Statement of Your Cu	rrent Mon	thly Inc	ome			12/19
attach a separatase number (qualifying milit	e and accurate as possible. If two married people atte sheet to this form. Include the line number to vif known). If you believe that you are exempted fro tary service, complete and file Statement of Exemple Calculate Your Current Monthly Income syour marital and filing status? Check one or	which the additiona om a presumption of ption from Presum	al information a of abuse becau	ipplies. On se you do i	the top of a not have prin	ny additional pages, wri marily consumer debts o	te your name and or because of
_	married. Fill out Column A, lines 2-11.	my.					
	ried and your spouse is filing with you. Fill o	ut both Columns	A and B lines	2-11			
_	ried and your spouse is NOT filing with you.			2 11.			
	ving in the same household and are not leg			lumns A a	nd B, lines 2	2-11.	
р	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are ving apart for reasons that do not include evadi	egally separated	under nonban	kruptcy lav	v that appli	es or that you and you	
101(10A). F the 6 month	overage monthly income that you received from all for example, if you are filing on September 15, the 6-n is, add the income for all 6 months and divide the tota on the same rental property, put the income from that p	nonth period would by 6. Fill in the res	be March 1 throu ult. Do not includ	ugh August : de any incor	31. If the amone amount m	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ns (before all	\$ 2	2,587.72	\$	
	y and maintenance payments. Do not include B is filled in.	payments from a	a spouse if	\$	0.00	\$	
of you of from an and roo	ounts from any source which are regularly por your dependents, including child support unmarried partner, members of your householemmates. Include regular contributions from a spont include payments you listed on line 3.	. Include regular o d, your dependen	contributions its, parents,	\$	0.00	\$	
	ome from operating a business, profession,						
_		Debt \$ 0.00	or 1				
	eceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	y and necessary operating expenses nthly income from a business, profession, or far	0.00	Copy here ->	\$	0.00	\$	
	ome from rental and other real property	Ψ	.,	· ——		·	
		Debt	or 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00	0	•	0.00	Φ.	
	nthly income from rental or other real property	\$	Copy here ->		0.00	\$	
7. Interest	t, dividends, and royalties			\$	0.00	Ψ	

Official Form 122A-1

## Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 56 of 69

Case number (if known)

		'				
			Colum. Debto		Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation		\$	0.00	\$	
	Do not enter the amount if you contend that the amount received was a the Social Security Act. Instead, list it here:	benefit unde	er			
	For you \$ For your spouse \$	0.00				
9.	Pension or retirement income. Do not include any amount received the benefit under the Social Security Act. Also, except as stated in the next so not include any compensation, pension, pay, annuity, or allowance paid United States Government in connection with a disability, combat-related disability, or death of a member of the uniformed services. If you receive pay paid under chapter 61 of title 10, then include that pay only to the except one texceed the amount of retired pay to which you would otherwise if retired under any provision of title 10 other than chapter 61 of that title.	sentence, do by the d injury or ed any retire ktent that it be be entitled		0.00	\$	
10	Income from all other sources not listed above. Specify the source a Do not include any benefits received under the Social Security Act; paymereceived as a victim of a war crime, a crime against humanity, or internation domestic terrorism; or compensation, pension, pay, annuity, or allowance United States Government in connection with a disability, combat-related disability, or death of a member of the uniformed services. If necessary,	ments tional or e paid by th d injury or	e			
	sources on a separate page and put the total below.	1101 011101				
	·		\$	0.00	\$	
			\$	0.00	\$	-
	Total amounts from separate pages, if any.		⊦ \$	0.00	\$	
11	Calculate your total current monthly income. Add lines 2 through 10 each column. Then add the total for Column A to the total for Column B.		2,587.7	* + \$ _		2,587.72
Pari	2: Determine Whether the Means Test Applies to You				incor	ne
ı aıı	Determine Whether the means rest Applies to rou					
12	Calculate your current monthly income for the year. Follow these ste	•				
	12a. Copy your total current monthly income from line 11			Copy line 11	here=> \$	2,587.72
	Multiply by 12 (the number of months in a year)				X	12
	12b. The result is your annual income for this part of the form				12b. \$	31,052.64
13	Calculate the median family income that applies to you. Follow these	e steps:				
	Fill in the state in which you live.					
	Fill in the number of people in your household.					
	Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the for this form. This list may also be available at the bankruptcy clerk's of	link specifie	d in the se	eparate instruc	13. \$	91,580.00
14	How do the lines compare?					
	Line 12b is less than or equal to line 13. On the top of page Go to Part 3. Do NOT fill out or file Official Form 122A-2.	1, check bo	ox 1, There	e is no presun	nption of abuse.	
	14b.  Line 12b is more than line 13. On the top of page 1, check begin to Part 3 and fill out Form 122A–2.	box 2, The p	oresumptio	on of abuse is	determined by Form	122A-2.
Part	3: Sign Below					
	By signing here, I declare under penalty of perjury that the informat	tion on this s	statement	and in any att	achments is true and	correct.
	χ /s/ Holly Serrano					
	Holly Serrano Signature of Debtor 1					
1	Date March 5, 2020					

**Holly Serrano** 

Debtor 1

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 57 of 69

Debtor 1	Holly Serrano	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

Case 2:20-bk-51239 Doc 1 Filed 03/05/20 Entered 03/05/20 16:08:21 Desc Main Document Page 58 of 69

Debtor 1 Holly Serrano Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 09/01/2019 to 02/29/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Kroger

Income by Month:

6 Months Ago:	09/2019	\$1,262.51
5 Months Ago:	10/2019	\$0.00
4 Months Ago:	11/2019	\$0.00
3 Months Ago:	12/2019	\$0.00
2 Months Ago:	01/2020	\$0.00
Last Month:	02/2020	\$0.00
	Average per month:	\$210.42

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: The Pataskala Vision Center

Year-to-Date Income:

Last Year:

This Year:

Current Year-to-Date Income: \$6,022.50 from check dated 2/29/2020.

Income for six-month period (Current+(Ending-Starting)): \$14,263.80 .

Average Monthly Income: **\$2,377.30**.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Acceptance Now 5501 Headquarters Dr. Plano, TX 75024

ACE Cash Express, Inc. 1231 Greenway Drive Suite 600 Irving, TX 75038

ACIMA Credit FKA Simple 9815 S. Monroe St. Floor 4 Sandy, UT 84070

Ad Astra Recovery Services, Inc. Suite 118 7330 W. 33rd Street N. Wichita, KS 67205

Allied Interstate PO Box 19326 Minneapolis, MN 55419

Allstate Insurance Company P.O. Box 12055 1819 Electric Rd. S.W. Roanoke, VA 24018

Alltran Financial PO Box 722929 Houston, TX 77272

Associated Credit Services, Inc. 115 Flanders Road, Suite 140 PO Box 5171 Westborough, MA 01581-5171

Berkeley Park LLC 5185 Sulgrave Drive New Albany, OH 43054

Capital One Auto Finance CB Disputes Team PO Box 259407 Plano, TX 75025

Capital One Bank 15000 Capital One Drive Richmond, VA 23238

CashNet USA 175 W. Jackson Blvd., Suite 1000 Chicago, IL 60604 CBCS PO Box 163729 Columbus, OH 43216-3729

CBE Group 1309 Technology Pkwy Cedar Falls, IA 50613

CBHV PO Box 831 Newburgh, NY 12550

CCI 501 Green St. 3rd Floor, suit 301 Augusta, GA 30901

Central Credit Services, LLC 20 Corporate Hills Dr. Saint Charles, MO 63301-3749

Check City 2729 B W. Broad St. Richmond, VA 23220

Chesterfield EFCU PO Box 820 Chesterfield, VA 23832

Columbia Gas of Ohio Revenue Recovery PO Box 117 Columbus, OH 43216

Commonwealth Anesthesia Associates PO 35808 Richmond, VA 23235

Convergent 800 SW 396h St. Suite 100 Renton, WA 98057

Convergent PO Box 9004 Renton, WA 98057

Credit Collection Services PO Box 607 Norwood, MA 02062

Credit Collection Services 725 Canton Street Norwood, MA 02062

Credit One Bank PO Box 98872 Las Vegas, NV 89193-8872

Department of Education/Navient 123 Justison Street 3rd floor Newark, DE 19713

Diversified Consultants PO Box 551268 Jacksonville, FL 32255

Dominion Energy 1 James Ctr Richmond, VA 23219

EOS CCA PO Box 169 Norwell, MA 02061

ERC
PO Box 23870
Jacksonville, FL 32241-3870

Erie Insurance Group Home Office 100 Erie Insurance Place Erie, PA 16530

Fabco PO Box 20850 Columbus, OH 43220

First National Collection Bureau, Inc. 610 Waltham Way Sparks, NV 89434

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107

First Virginia 159 E. Belt St. Richmond, VA 23224

Geico Casualty Company One Geico Center Macon, GA 31296-0001

Hunter Warfield 4620 Woodland Corporate Blvd. Tampa, FL 33614 Huntington National Bank 41 S. High St. Columbus, OH 43215

Jefferson Capital System, LLC PO Box 7999 Saint Cloud, MN 56302-7999

Joseph Mann & Creed PO Box 1270 Twinsburg, OH 44087

JP Recovery Services PO Box 183221 Columbus, OH 43218-3221

K A P S & Co., USA LLC 2210 Plaza Dr., Suite 150 Rocklin, CA 95765

Kemper Direct Insurance Company P.O. Box 3057 Scranton, PA 18505

Larayteet Ayers & Whitlock 10160 Staples Mill Road Suite 105 Glen Allen, VA 23060

Liberty Mutual Insurance Company 1333 Main Street, Suite 600 Columbia, SC 29201

Lifestyle Communities LTD 5946 New Albany Rd. West New Albany, OH 43054

LVNV Funding LLC c/o Resurgent Capital Services PO Box 1269 Greenville, SC 29603

Main Street Dental of New Albany 153 W. Main Street Suite 101 New Albany, OH 43054

Mount Carmel Health System 6150 East Broad Street Columbus, OH 43213

National Credit Adjusters PO Box 3023 327 W. 4th St. Hutchinson, KS 67504-3023 National Credit Systems PO Box 312125 Atlanta, GA 31131

Nationwide Credit, Inc. PO Box 10354 Des Moines, IA 50306-0354

Nationwide Energy Partners 80 West St., Suite 150 Columbus, OH 43215

Nationwide Insurance P.O. Box 182150 Columbus, OH 43218-2150

NES - Nation Enterprise Systems 2479 Edison Blvd., Unit A Twinsburg, OH 44087-2340

Northland Group Inc. PO Box 390846 Minneapolis, MN 55439

OhioHealth Corporation 5350 Frantz Rd. Dublin, OH 43016

Penn Credit Corporation PO Box 988 Harrisburg, PA 17108-0988

PNC Bank PO Box 3180 Pittsburgh, PA 15230

Portfolio Recovery Associates 120 Corporate Blvd. Suite 100 Norfolk, VA 23502

Possible Financial 2231 First Ave. Suite B Seattle, WA 98121

Professional Recovery Consultants 2700 Meridian Pkwy Suite 200 Durham, NC 27713

Progressive 256 W. Data Dr. Draper, UT 84020 Progressive Insurance PO Box 31260 Tampa, FL 33631

QVC Inc PO Box 2254 West Chester, PA 19380

Rainbow Pediatrics 153 W Main St., Suite 200 New Albany, OH 43054

RBC PO Box 1548 Mansfield, OH 44901-1548

Reginonal Acceptance PO Box 61476 Virginia Beach, VA 23466

RMS PO Box 19646 Minneapolis, MN 55419

Seventh Avenue 1112 7th Avenue Monroe, WI 53566-1364

Speedy Cash PO Box 780408 Wichita, KS 67278-0408

Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100

Suntrust Bank DBA Lightstream 303 Peachtree Street Northeast Atlanta, GA 30308

SYNCB/Belk PO Box 965005 Orlando, FL 32896

T-Mobile Bankruptcy Team  $\square$  PO Box 53410  $\square$  Bellevue, WA 98015-3410

Tate & Kirlin Associates 2810 Southampton Road Philadelphia, PA 19154-1207

The Bank of Missouri - Total Visa PO Box 85710 Sioux Falls, SD 57118 The Little Clinic 2620 Elmhill Pike Nashville, TN 37214

Vantage Sourcing PO Box 6786 Dothan, AL 36302

Verizon Wireless PO Box 650051 Dallas, TX 75265

Wells Fargo PO Box 6995 Portland, OR 97228